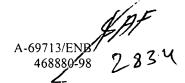
Ser.



CERTIFICATE OF MAILING (37 CFR 1.8(A))

I hereby certify that this paper (along with any referred to as being attached or enclosed) is being deposited with the United States Postal Service on the date shown below with sufficient postage as First Class Mail in an envelope addressed to: Mail Stop AF, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

on May 10, 2004.

Laura Lee Mosier

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Art Unit:

2494

JOHN H. JERMAN

Application No.

09/938,871

Examiner:

Tamai, Karl I.

Filed:

August 24, 2001

For:

BALANCED MICROMECHANICAL

DEVICE HAING TWO DEGREES OF

Date:

May 10, 2004

MOTION

AMENDMENT TRANSMITTAL

Mail Stop AF Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Transmitted herewith is:

[X] Amendment, ____ pges;

[X] a one month extension request is hereby sought;

[] Other:

The fees have been calculated as shown below:

	Claims Remaining After Amendment	Minus	Highest Previously Paid For	Present Extra	Small Entity Rate Fee	OR	Other than a Small Entity Rate Fee
Total Claims	16	-	33		x 9 = \$		x 18 = \$
Indep Claims	3	-	4		x 43 = \$		x 86 = \$
	[] Multiple De and Fee not			ed	+145 = \$		+290 = \$
			- <u>"</u>		TOTAL \$-0-		TOTAL \$-0-

Total Additional Claims Fee:

\$ - 0 -

05/14/2004 AWONDAF1 00000031 09938871

01 FC:2251

55.00 OP

-1-



Applicant hereby petitions for a ONE month Extension of Time to respond to the Official Action mailed January 9, 2003 and includes the following fee:

	Small Entity			Large Ent	tity					
[X]	One month	\$ 55.00	[]	One mon	th	\$110.00				
	Two months	\$210.00	Ĭ	Two mon	ths	\$420.00				
[]	Three months	\$475.00	[]	Three mo	nths	\$950.00				
[]	Four months	\$740.00	[]	Four mon		\$1,480.00				
[]	Five months	\$1,005.00	[]	Five mon	ths	\$2,010.00				
		Extension of Time F	ee:		<u>\$ 55.00</u>					
[]	Fee regarding Information Disclosure Statement:									
[]	Fee Under 37 (CFR 1.17(p)	\$							
[]	Petition Fee U	nder 37 CFR 1.17(i)	\$							
		Total Information D	isclosure Statem	nent Fee:	<u>\$.00</u>					
[]	Other fees (list	individually):								
			Total Other F	'ees:	<u>\$.00</u>					
			TOTAL FEES	S:	\$ <u>55.00</u>					
[X]	A check including the amount of the above indicated TOTAL FEES is attached.									
[]	Please charge Deposit Account No. 50-2319(). in the amount of \$00.									
[]	No fee is requi	red.								
[]	Applicant is no	ow a SMALL / LARG	GE entity.							
[X]	The Commissioner is hereby authorized to charge any underpayment of the fees associated with this communication under 37 C.F.R. §1.20(d), including any necessary fees for extension of time, or credit any overpayment to Deposit Account No. 50-2319: (A-69713/ENB(468880-98)).									

Respectfully submitted,

DORSEY & WHITNEY ILP

Edward N. Bachand Reg. No. 37,085

DORSEY & WHITNEY LLP Suite 3400, Four Embarcadero Center San Francisco, CA 94111-4187 Telephone: (650) 494-8700

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